SERFF Tracking #: FNWW-128851538 State Tracking #:

Company Tracking #: 034 DISC

State: Arkansas Filing Company: Farmers New World Life Insurance Company

TOI/Sub-TOI: L06I Individual Life - Variable/L06I.002 Single Life - Flexible Premium

Product Name: VUL Disclosure

Project Name/Number: VUL Disclosure/034 Disc

Filing at a Glance

Company: Farmers New World Life Insurance Company

Product Name: VUL Disclosure

State: Arkansas

TOI: L06I Individual Life - Variable

Sub-TOI: L06I.002 Single Life - Flexible Premium

Filing Type: Form

Date Submitted: 01/16/2013

SERFF Tr Num: FNWW-128851538

SERFF Status: Closed-Approved-Closed

State Tr Num:

State Status: Approved-Closed

Co Tr Num: 034 DISC

Implementation On Approval

Date Requested:

Author(s): Peter Lindstrom, Sunne Powell, Patrice Norgate, Isaac Liu, Joel Kuni

Reviewer(s): Linda Bird (primary)

Disposition Date: 01/22/2013

Disposition Status: Approved-Closed

Implementation Date:

State Filing Description:

SERFF Tracking #: FNWW-128851538 State Tracking #:

Company Tracking #: 034 DISC

State: Arkansas Filing Company: Farmers New World Life Insurance Company

TOI/Sub-TOI: L06I Individual Life - Variable/L06I.002 Single Life - Flexible Premium

Product Name: VUL Disclosure **Project Name/Number:** VUL Disclosure/034 Disc

General Information

Project Name: VUL Disclosure Status of Filing in Domicile: Pending

Project Number: 034 Disc

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Overall Rate Impact: Filing Status Changed: 01/22/2013

State Status Changed: 01/22/2013

Deemer Date: Created By: Peter Lindstrom

Submitted By: Peter Lindstrom Corresponding Filing Tracking Number: 034 Disc

Filing Description:

NAIC NO.: 0212-63177

Re: Form No.: 034 Disc Variable Universal Life Insurance Disclosure

Dear Sir or Madam:

We are submitting copies of the above referenced forms for your approval. We have made changes to previously approved form 31-4439 (approved on 12/5/2007). The form is used with our form 2007-034 (Approved on 12/5/2007). Only minor changes have been made to the previously approved form to allow the signature of the Proposed Policy Co-Owner. I have provided a red-lined copy showing the only changes to the form.

No part of this filing contains any unusual or possibly controversial items from normal company or industry standards. We plan to introduce these forms in your state once approval has been received. These forms will be used by licensed representatives who are appointed with the company and may sell through our agency distribution systems.

In addition to the policy forms, this filing packet contains the required certifications and filing fees, if any. Washington, our state of domicile has no filing fee. To the best of our knowledge, these forms comply with the laws of your state and department. Please provide your approval of these forms. If you have any questions, please call me at 206-275-8131, or email me at peter.lindstrom@farmersinsurance.com.

Sincerely,

Pete Lindstrom

Company and Contact

Filing Contact Information

Peter Lindstrom, Contract Specialist peter.lindstrom@farmersinsurance.com

3003 77th Ave SE 206-275-8131 [Phone] Mercer Island, WA 98040 206-236-6526 [FAX]

Filing Company Information

Farmers New World Life Insurance CoCode: 63177 State of Domicile: Washington

Company Group Code: 212 Company Type: Life 3003 77th Avenue S.E. Group Name: State ID Number:

Mercer Island, WA 98040 FEIN Number: 91-0335750

(206) 275-8131 ext. [Phone]

SERFF Tracking #: FNWW-128851538 State Tracking #: Company Tracking #: 034 DISC

State: Arkansas Filing Company: Farmers New World Life Insurance Company

TOI/Sub-TOI: L06I Individual Life - Variable/L06I.002 Single Life - Flexible Premium

Product Name: VUL Disclosure **Project Name/Number:** VUL Disclosure/034 Disc

Filing Fees

Fee Required? Yes Fee Amount: \$50.00

Retaliatory? No

Fee Explanation: \$50.00 per filling of form

Per Company: No

CompanyAmountDate ProcessedTransaction #Farmers New World Life Insurance Company\$50.0001/16/201366591852

SERFF Tracking #: FNWW-128851538 State Tracking #: Company Tracking #: 034 DISC

State: Arkansas Filing Company: Farmers New World Life Insurance Company

TOI/Sub-TOI: L06I Individual Life - Variable/L06I.002 Single Life - Flexible Premium

Product Name: VUL Disclosure

Project Name/Number: VUL Disclosure/034 Disc

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	01/22/2013	01/22/2013

SERFF Tracking #: FNWW-128851538 State Tracking #: 034 DISC

State: Arkansas Filing Company: Farmers New World Life Insurance Company

TOI/Sub-TOI: L06I Individual Life - Variable/L06I.002 Single Life - Flexible Premium

Product Name: VUL Disclosure

Project Name/Number: VUL Disclosure/034 Disc

Disposition

Disposition Date: 01/22/2013

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	red-lined copy of changes made to form		Yes
Form	Variable Universal Life Insurance Disclosure		Yes

SERFF Tracking #: FNWW-128851538 State Tracking #: Company Tracking #: 034 DISC

State: Arkansas Filing Company: Farmers New World Life Insurance Company

TOI/Sub-TOI: L06I Individual Life - Variable/L06I.002 Single Life - Flexible Premium

Product Name: VUL Disclosure

Project Name/Number: VUL Disclosure/034 Disc

Form Schedule

Lead Form Number: 034 Disc									
Item	Schedule Item	Form	Form	Form	Form	Action Specif	ic	Readability	
No.	Status	Name	Number	Туре	Action	Data		Score	Attachments
1		Variable Universal Life Insurance Disclosure	034 Disc	POLA	Revised	Previous Filing Number:	FNWW- 125505815	61.100	034 Disc - Filing Master - Rev 1-15-
						Replaced Form Number:	31-4439		13.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
ОТН	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages

Farmers New World Life Insurance Company

Mercer Island Life Office: 3003 77th Ave. S.E., Mercer Island, WA 98040-2890 (206) 232-8400 Variable Policy Service Office: P.O. Box 724208, Atlanta, GA 31139 (877) 376-8008



Variable Universal Life Insurance Disclosure

I (We) understand that I (we) have applied for a variable universal life insurance policy from Farmers New World Life Insurance Company (FNWL). I (We) have received prospectuses for the underlying funds for the premium allocation options I (we) selected.

My (Our) Agent has reviewed each of these items with me (us), and I (we) understand that:

- 1. I (We) am buying a variable universal life insurance policy. I (We) am not investing directly in a mutual fund. This variable universal life insurance policy has investment risk, including the potential that the policy's value could decrease and the life insurance coverage may be lost.
- 2. The payments I (we) make, other than loan repayments, are premiums for the policy. I (We) may allocate the Net Premiums to the fixed account, or to subaccounts that I (we) select. Amounts allocated to each subaccount will be invested in distinct underlying portfolios. "Net Premiums" as used here means the premiums I (we) pay, less any premium expense charges, as described in the policy prospectus.
- 3. Each month, FNWL will deduct charges, as described in the policy prospectus, from the policy's value. These charges cover issue, insurance and administrative costs and the risk cost of the policy and any optional benefits. The policy prospectus and fund prospectuses describe other fees and expenses which are charged against the assets of the selected subaccounts and of the portfolios in which they invest.
- 4. Future policy values will depend on all of the following:
 - Actual investment results of the subaccount(s) I (we) select;
 - The interest credited to the fixed account (if selected);
 - Fees, charges, expenses, and cost of insurance rates;
 - The amount and timing of premium payments and of any partial surrenders or policy loans I (we) take; and
 - Any changes I (we) make to the policy.

Policy values may be more or less than premiums paid.

- 5. I (We) can surrender my policy for the Cash Surrender Value at any time. I (We) can borrow a certain percentage of the policy's Cash Surrender Value. After the first policy year, I (we) can take partial surrenders up to a certain percentage of the Cash Surrender Value. Policy loans and partial surrenders have other limits, conditions and/or charges, and they will reduce the death benefit amount payable and the contract value available to cover the monthly policy deductions. "Cash Surrender Value" as used here means the contract value of the policy less any surrender charge, minus any monthly deductions due and unpaid, and less any outstanding policy loans. Surrender charges may significantly affect the amount of Cash Surrender Value available for policy loans and partial surrenders. The policy prospectus describes these limits, conditions, effects, and charges in detail.
- 6. Policy illustrations or sales illustrations, if provided, are hypothetical. Actual investment rates of return and the policy's performance will vary. Illustrations show only how different rates of return and other assumptions could affect the policy's values and benefits over time.
- 7. My (Our) application correctly states whether I (we) intend to replace an existing policy to buy this policy. (To "replace" includes to surrender, end, reduce, withdraw or borrow from, or discontinue premium payments on, the existing policy.) If so, I (we) have considered relevant factors under both policies including: a) incontestability and suicide provisions; b) evidences of insurability; c) surrender charges; d) premium payments and insurance rates; e) cash values; f) other fees, charges, investment options and features; and g) any tax consequences of the replacement. I (We) have reviewed my (our) existing coverage with my (our) agent and determined that the replacement is appropriate for my (our) needs and objectives.
- 8. Neither FNWL nor its Agents give tax or legal advice. I (We) will consult with my (our) own professional tax or legal advisor as I (we) deem appropriate. My (Our) tax status and the tax status of the policy will affect taxation of policy values, policy loans, or surrender proceeds. The policy prospectus gives more information.
- 9. Variable life insurance is designed for long-term buyers who seek life insurance benefits and a choice of investment options for the policy's value. I (We) have reviewed my (our) insurance needs and financial objectives with my (our) Agent. I (We) have determined that the policy is affordable and is appropriate for my (our) needs or objectives.
- 10. This policy is not backed by the Federal Government or any banking institution. This policy is not insured by the Federal Deposit Insurance Corporation (FDIC) or the Federal Saving and Loan Insurance Corporation (FSLIC).

Proposed Policy Owner Signature	Date	Proposed Policy Owner Name (please print)
Proposed Policy Co-Owner Signature	Date	Proposed Policy Co-Owner Name (please print)
I have reviewed each of these items with the l	Proposed Policy Owner(s):	
Agent/Representative Signature	Agent C	ode
		17.4

SERFF Tracking #:	FNWW-128851538	State Tracking #:		Company Tracking #:	034 DISC	
State:	Arkansas		Filing Company:	Farmers New World	Life Insurance Company	

TOI/Sub-TOI: L06I Individual Life - Variable/L06I.002 Single Life - Flexible Premium

Product Name: VUL Disclosure

Project Name/Number: VUL Disclosure/034 Disc

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification		
Comments:			
Attachment(s):			
034 Disc Flesch Score .pd	f		
		Item Status:	Status Date:
Satisfied - Item:	red-lined copy of changes made to form		
Comments:			
Attachment(s):			
034 Disc - Redlined - Rev	1-15-13.pdf		

Farmers New World Life Insurance Company Certificate of Readability

The undersigned certifies that the attached forms have a Flesch score as follows:

Form # <u>Flesch</u>
Score
034 Disc
61.1

By:

Name: John Patton

Its: Vice President of Staff Operations

January 15, 2013

Farmers New World Life Insurance Company

Mercer Island Life Office: 3003 77th Ave. S.E., Mercer Island, WA 98040-2890 (206) 232-8400 Variable Policy Service Office: P.O. Box 724208, Atlanta, GA 31139 (877) 376-8008



Variable Universal Life Insurance Disclosure

(If there is more than one Policy Owner all Policy Owners must complete a separate Variable Universal Life Disclosure)

I (We) understand that I (we) have applied for a variable universal life insurance policy from Farmers New World Life Insurance Company (FNWL). I (We) have received prospectuses for the underlying funds for the premium allocation options I (we) selected.

Proposed Policy	, 1 1	, 0	h me (us), and I (we) understand that:			
Owner's Initials : 1.		nas investment risk, includi	I (We) am not investing directly in a mutual fund. This variable ng the potential that the policy's value could decrease and the life			
2.	Premiums to the fixed account	e, or to subaccounts that I (portfolios. "Net Premium	re premiums for the policy. I (We) may allocate the Net we) select. Amounts allocated to each subaccount will be s" as used here means the premiums I (we) pay, less any premium			
3.	3. Each month, FNWL will deduct charges, as described in the policy prospectus, from the policy's value. These cover issue, insurance and administrative costs and the risk cost of the policy and any optional benefits. The poprospectus and fund prospectuses describe other fees and expenses which are charged against the assets of the subaccounts and of the portfolios in which they invest.					
4.	The interest credited tFees, charges, expense	ults of the subaccount(s) I to the fixed account (if sele es, and cost of insurance rang of premium payments as take to the policy.	cted);			
5.	policy's Cash Surrender Value. the Cash Surrender Value. Pol reduce the death benefit amous Surrender Value" as used here deductions due and unpaid, and	After the first policy year, licy loans and partial surrer nt payable and the contract means the contract value of dless any outstanding politible for policy loans and pa	alue at any time. I (We) can borrow a certain percentage of the I (we) can take partial surrenders up to a certain percentage of olders have other limits, conditions and/or charges, and they will to value available to cover the monthly policy deductions. "Cash of the policy less any surrender charge, minus any monthly cy loans. Surrender charges may significantly affect the amount retial surrenders. The policy prospectus describes these limits,			
6.		tions show only how differ	ypothetical. Actual investment rates of return and the policy's rent rates of return and other assumptions could affect the			
7.	includes to surrender, end, redu If so, I (we) have considered re evidences of insurability; c) sur charges, investment options an	uce, withdraw or borrow for elevant factors under both perender charges; d) premiured features; and g) any tax of	It to replace an existing policy to buy this policy. (To "replace" com, or discontinue premium payments on, the existing policy.) policies including: a) incontestability and suicide provisions; b) in payments and insurance rates; e) cash values; f) other fees, consequences of the replacement. I (We) have reviewed my (our) to the replacement is appropriate for my (our) needs and objectives			
8.		riate. My <u>(Our)</u> tax status ar	We) will consult with my (our) own professional tax or legal and the tax status of the policy will affect taxation of policy values, us gives more information.			
9.	options for the policy's value.	I (We) have reviewed my (c	tho seek life insurance benefits and a choice of investment <u>our</u>) insurance needs and financial objectives with my <u>(our)</u> Agent. s appropriate for my <u>(our)</u> needs or objectives.			
10			any banking institution. This policy is not insured by the Federal ving and Loan Insurance Corporation (FSLIC).			
Proposed Policy (Owner Signature	Date	Proposed Policy Owner Name (please print)			
Proposed Policy	Co-Owner Signature	<u>Date</u>	Proposed Policy Co-Owner Name (please print)			
I have reviewed	each of these items with the Prop	oosed Policy Owner <u>(s)</u> :				